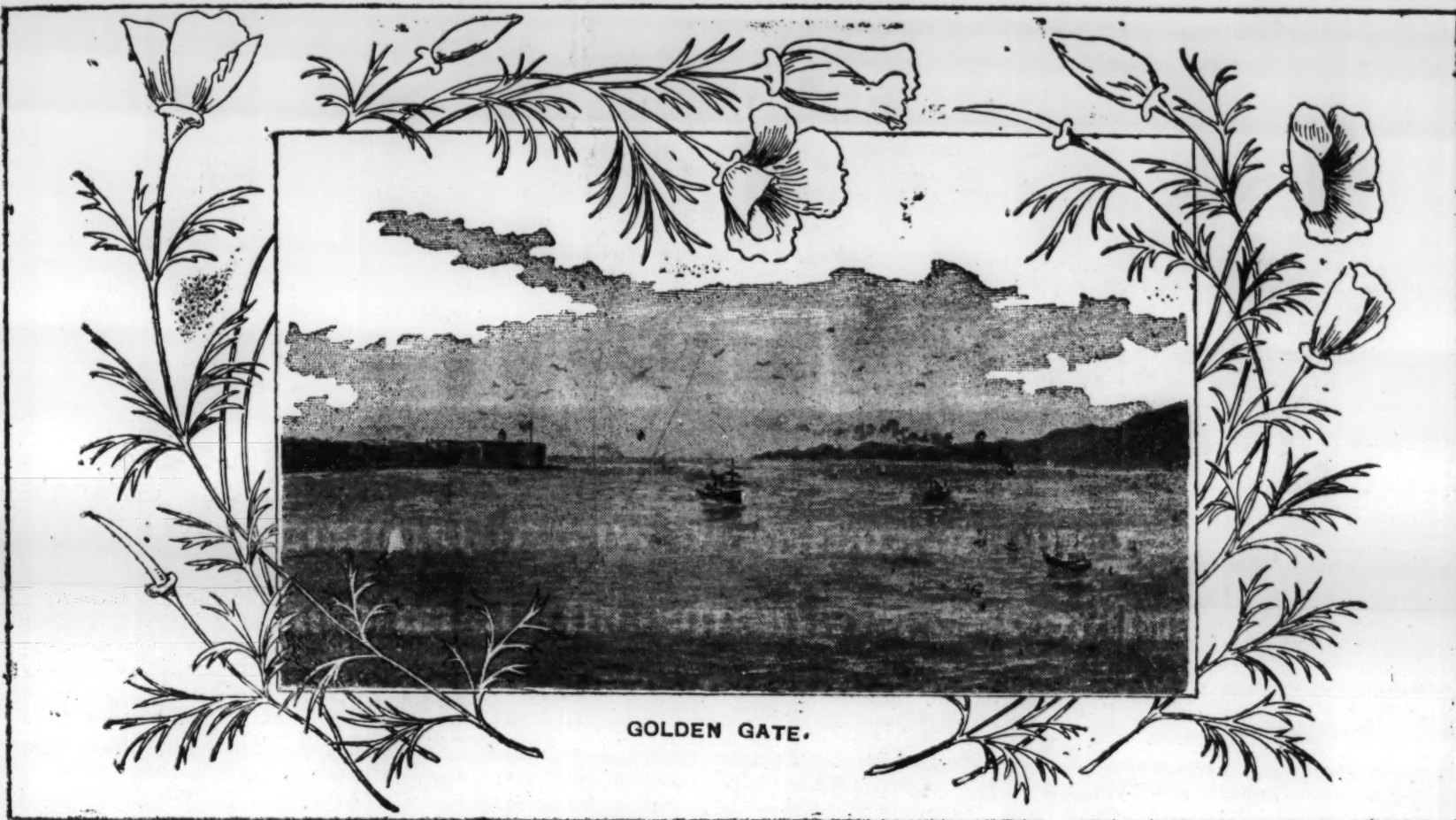


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California Medical Journal.

VOL XVII.

San Francisco, August, 1896

NO. 8



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A GROUP OF DELEGATES AT THE PORTLAND "NATIONAL."

California Medical Journal.

VOL. XVII.

San Francisco, California, August, 1896

NO 8

My First Trip to the Ranch.

J. A. MUNK, M. D., Los Angeles, Cal.

I recall with vivid distinctness my first visit to Arizona and introduction to ranch life in the Spring of 1884. The peculiar landscape of that country and the new experiences on the range made an impression that will never be forgotten. It was a picture that was altogether new and fascinating, and entirely different from anything that I had ever seen.

In 1882 my brother "Bill" located a cattle ranch in Railroad Pass in Southeastern Arizona. The gap is one of a series of natural depressions in a succession of mountain chains on the thirty-second parallel route, none of which exceeds an elevation of 5,000 feet above sea level all the way from New Orleans to San Francisco, a distance of 2,500 miles. On this route is built the Southern Pacific railroad, which has the easiest grade of any transcontinental line.

Railroad Pass, where our ranch is situated and the objective point of my trip, embraces many miles of territory

and is a fine grazing section. It consists of rolling plains, foothills and mountains, which are vast meadows of the nutritious gramma grass. The Pass is handsomely bounded and presents a magnificent view. To the north are the Pinaleno mountains and towering Mt. Graham that is nearly 11,000 feet high and lies dark in the shadow of its dense pine forest. Far southward stretch the rugged Chiricahuas; and near by stands bold Dos Cabezas, whose giant double head of solid granite shows as a conspicuous land mark over a wide scope of country. The distance across the Pass from peak to peak as the crow flies is perhaps fifty miles. San Simon Valley lies to the east and Sulphur Spring Valley to the west. Beyond these broad valleys other mountains rise in majestic grandeur, and mountains bound the horizon in every direction.

At the time that the ranch was located the Pass Country was considered uninhabitable owing to the hostility of

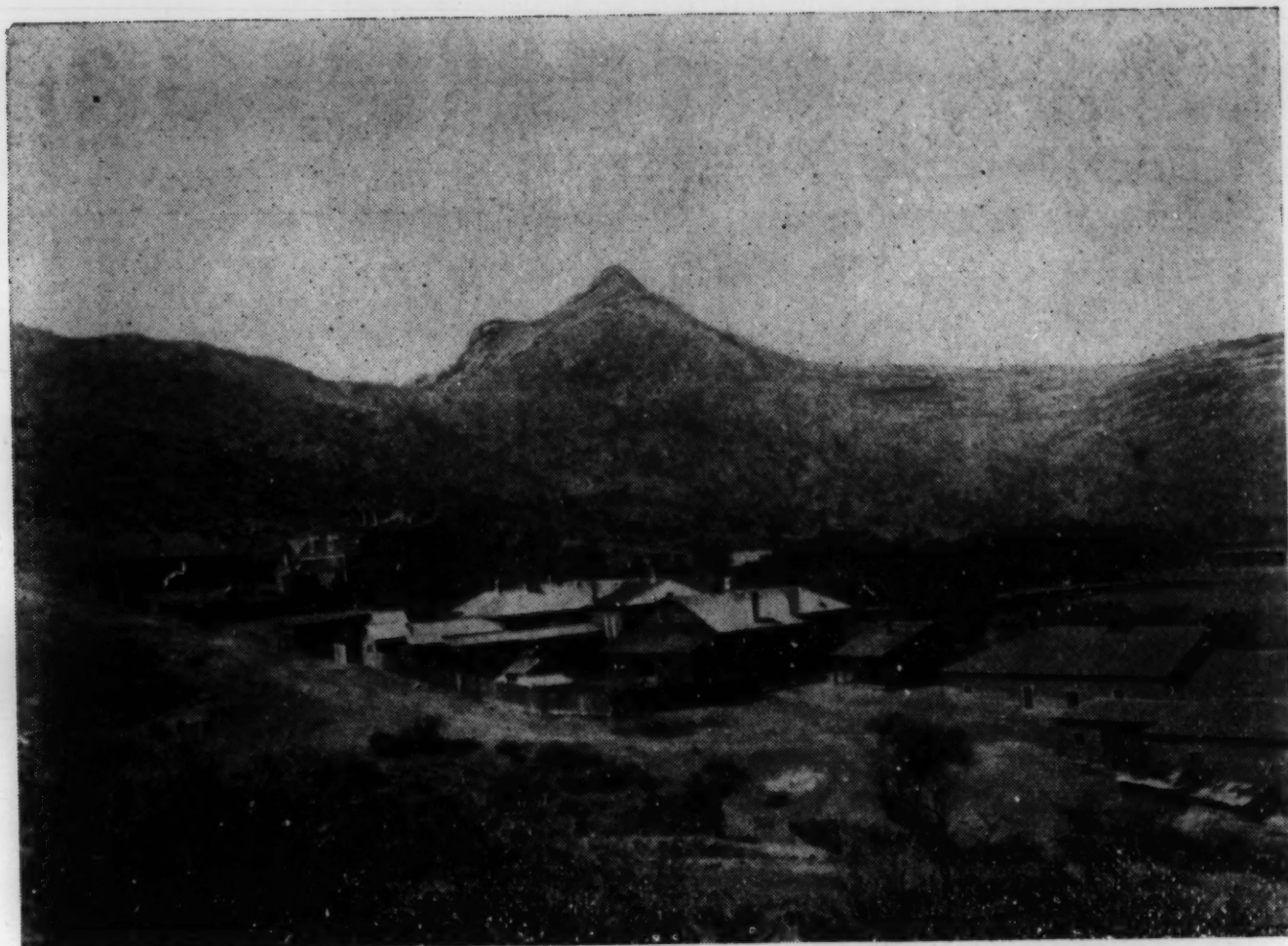
the Indians and the scarcity of water. Not a single permanent spring or stream of water was known to exist in that whole region, while fine gramma grass grew everywhere. Its suitability as a cattle range caused the ground to be thoroughly prospected for water, which resulted in the discovery of several hidden springs. All the springs found but one were insignificant, their flow fluctuating with the seasons; but Pinaleno, the big spring, throws a stream of water which fills a three inch pipe that never varies. When the spring was found not a drop of water was visible upon the surface, but a small patch of canebrake that was growing in black soil, alone gave any evidence of concealed moisture. By sinking a shallow well only a few feet deep, water was struck where it flowed over bedrock at the foot of a hill, which was brought to the surface further down the slope through a ditch, and is now conducted in pipes to the water tank in the garden and troughs in the corral. The water is perfectly soft and warm registering 70° Fahrenheit.

Again, when our ranch was opened the Indians were bad in that vicinity and had been hostile for many years. The ranch is a part of the old Chiricahua reservation which was once the home and hunting ground of a famous band of Indians by that name, and the most bold and warlike of all the Apache tribes. Cochise was their greatest chief and the most noted of all the Apache leaders. He posed as the white man's friend, but covertly improved every opportunity to rob and murder. It is said that more than one

hundred persons fell by his hand alone. His favorite haunt was Apache Pass, where he laid in wait with his murderous crew for unsuspecting victims, weary travelers in search of water and a pleasant camping ground. When he was attacked by a superior force as sometimes happened, he retired across the adjoining valley to his stronghold in the Dragoon mountains, from which safe refuge he was never successfully routed. Because of Indian depredations people were afraid to go into the country to settle, and to do so was to take greater risks than the game was worth. Even in the early eighties, and as late as 1885 when that prince of rascals the wiley Geronimo made his bloody raid through Southern Arizona, the men who ventured in and occupied promising ranch and mining claims lived in daily peril of their lives which in many instances were paid as a forfeit.

Before railroads were built Railroad Pass was naturally a better road than Apache Pass, but it had no water. It was named by Lieut. J. G. Parke in 1855, while surveying for a Pacific railroad, on account of its suitability for railroad construction. Ft. Bowie was established in Apache Pass for the protection of travelers and settlers, and the troops stationed there did valiant service during many years. Only recently the post was abandoned, unwisely it seems, as Apache Kid and other renegade Indians from San Carlos, even yet make an occasional raid, when some body always gets killed.

I timed my trip to correspond with the arrival of a shipment of ranch sup-

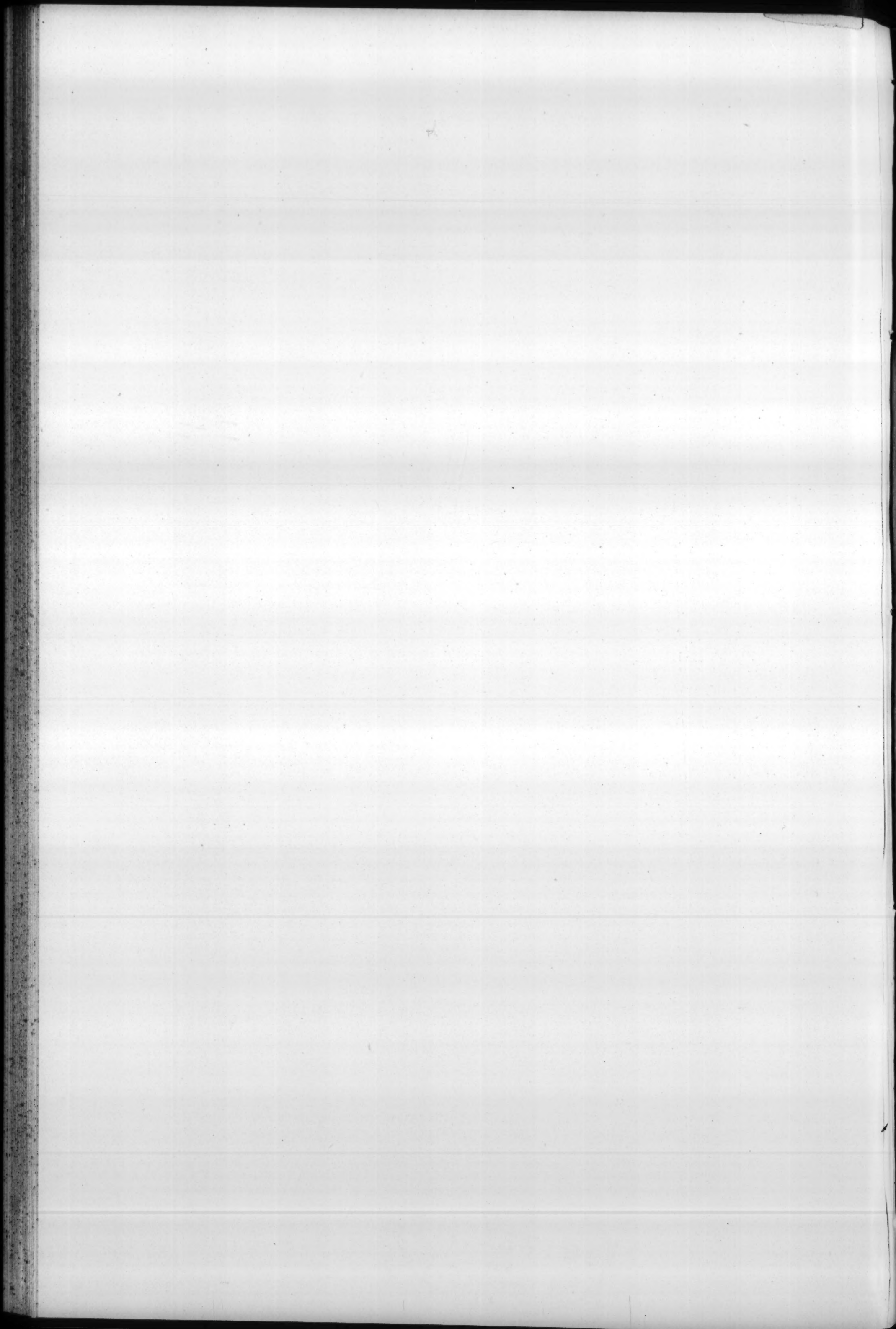


Fort Bowie.



Apache Pass.





plies which had been forwarded from St. Louis to Bowie Station. I was cordially greeted by the ranch force at the depot and was immediately initiated as a tenderfoot. I inquired of "Bill" how far it was to a near point of mountain. He gave a *quien sabe* shrug of the shoulders and answered in true Yankee fashion by asking how far I thought it was. Estimating the distance as I would in a prairie country I replied presently, "about a mile." He smiled and remarked that it was fully five miles away by actual measurement. I had unwittingly taken my first lesson in plaincraft, and thereafter prudently refrained from making another "sure guess." The deception was due to the dry and rarified atmosphere which is peculiar to the Southwest, and produces an effect that distorts the vision and misleads the unpracticed eye. Not only is it deceptive as to distance but also as to motion, for under a steady gaze inanimate objects dance about as if possessed with life, which sometimes seems so real that it is hard to be convinced to the contrary.

We at once prepared to go to the ranch which was ten miles out and reached by a road that skirted the Dos Cabezas mountains. The new wagon was put into running order, the harness adjusted and our conveyance lightly loaded with baggage and commissary stores. All of the preliminaries having been completed, the horses were harnessed and hooked up. "Bill" mounted the drivers seat, drew the reins and cracked his whip but we did not go. The horses were only accus-

tomed to the saddle and knew nothing about pulling in harness. Sam was a discharged cavalry horse and Box a native bronco. With such an unpromising start the prospect of reaching the ranch was not encouraging. But "necessity is the mother of invention" is an old adage that is nowhere better exemplified than on the frontier, where conveniences are few and the most has to be made of everything. After some delay and considerable maneuvering we finally got started.

For some distance the road was smooth and level and our progress satisfactory. As we drove leisurely along, I improved the opportunity to look about me and see the sights. It was a perfect day in April and there never was a brighter sky or balmy air than beamed and breathed upon us. The landscape was strangely fascinating and enveloped in a purple haze that was bewitching; and the air was tremulous with a magical light that produced startling phantasmagoric effects. It was my first sight of a mirage and it naturally excited my curiosity. It seemed as if an immense forest had suddenly sprung up in the San Simon valley where just before we had seen nearly bare ground. With every change in the angle of vision as we moved onward there occurred a corresponding change in the scene that had a charming kaleidoscopic effect. The transformation of some rough mountain into a symmetrical city, or of the dry valley into a lake of sparkling water, and other similar phenomena, are sights that are sometimes seen and are like fairy scenes in a land of enchantment.

As we crossed some well worn Indian trails which the Apaches had made during many years of travel to and fro between their rancherias in the Mogollon mountains and Mexico. I was abruptly brought back to real life by a sense of our perilous position, for were we not in the midst of hostile Indians? Nearly every mile of the distance traveled had at some time been the scene of a bloody tragedy that was enacted by the savage foe, but fortunately upon this occasion we were not molested. In a cropping of bedrock in the bed of an arroyo were a group of holes cut into the hard granite by the Indians who used them as mills for grinding there corn and seeds. Near by some mescal pits were also in evidence that were constructed of stone and made for cooking the agave plant which is highly prized as food by the Indians. The spot was evidently an old rendezvous where the marauding Apaches had often met in council to plan their bloody raids, and feasted on mescal and pinole in honor of some successful foray or victory over the enemy.

The road now led over a hill which filled us with misgiving. The team made a good start up the hill but soon stalled and then balked, and all urging with whip and voice failed to make the desired impression. After several attempts to proceed it was decided not to waste more time in futile effort, but after unhitching the horses, all hands helped in lightening the load and running the wagon up the hill. After reloading no difficulty was experienced in making a fresh start on a down grade; but further on where a second

and larger hill was encountered the failure to scale it was even more signal than the first. No amount of urging or manner of coaxing budged the horses; they were simply stubborn and determined not to move. Night was approaching and we were yet some distance from camp. "Bill" suggested as the best way out of an unpleasant predicament that the rest of us take the lead saddle horses and ride on, while he would take care of the team and, if necessary, camp out all night. We reluctantly took his advice, mounted the horses and finished our journey in the twilight.

Aaron, who was housekeeper at the ranch, gave us a hearty welcome and an appetizing supper which he had prepared in anticipation of our coming, that only hungry men could fully appreciate. Being weary we retired to our cots early and were soon lost in sound and refreshing sleep. The only sound that disturbed our slumbers during the night was the barking of coyotes, which, as a "concord of sweet sounds," was a dismal failure, but as a medley of discordant sounds was a decided success. We were up and out early the next morning, and witnessed the birth of a new day. The sunrise was glorious, and bright colors of many hues flashed across the sky. The valley re-echoed with the cheerful notes of the mocking bird, and the soft morning air was filled with the delicate fragrance of wild flowers. The scene was grandly inspiring and sent a thrill of pleasure through every nerve.

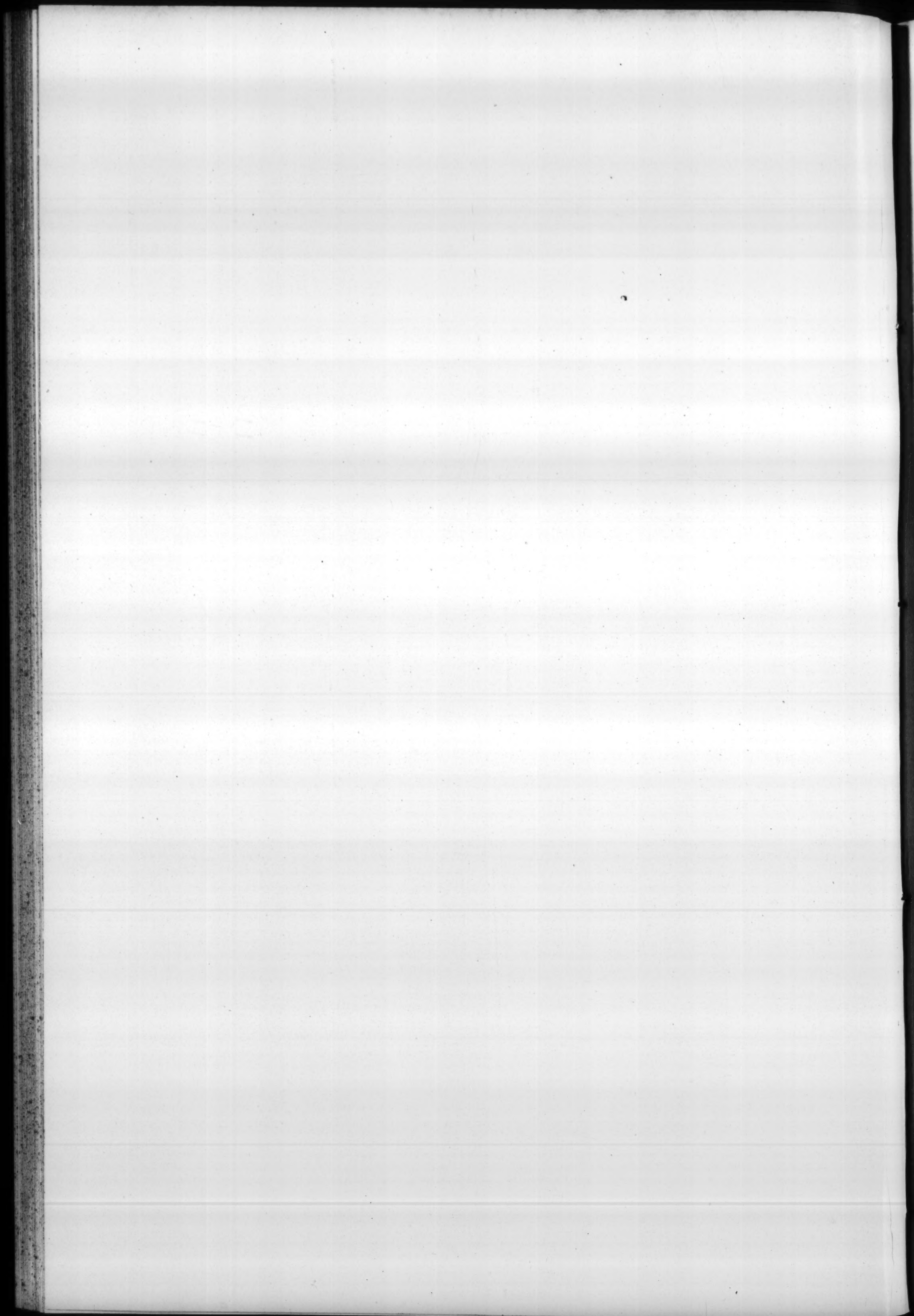
While thus absorbed by the beauties



Pinaleno Spring.



Apache Boy, San Carlos.



of the scene we heard an hello, and looking down the road in the direction of "Bill's" bivouac, we saw him coming, swinging his hat and driving at a rapid gait that soon brought him into our midst. In answer to our inquiries he reported that the horses stood in their tracks all night without food or water, while he slept in the wagon; and in the morning they readily start-

ed as if glad to go in the direction of provender. They were completely broken by their long fast and made no more trouble.

After a stay of four weeks, learning the ways of ranch life and having not a few exciting adventures, I returned home feeling well pleased with my first trip to the ranch.

Diphtheria.

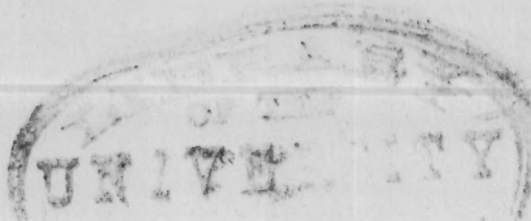
A. W. WYMAN, M. D., Cheyenne, Wyo.

I do not expect to write anything new upon this dread disease but have thought I might point some young physicians to a line of treatment which might be helpful. There is no other disease which I have been called upon to treat which has caused me so much uneasiness and about which I have been so unsettled.

How shall we know the disease? With a hot dry skin and quick pulse, headache, and usually marked depression; your patient will complain of a sore throat, though possibly the soreness is so slight that nothing will be said about it unless you ask.

On examining the throat you will find the tonsils swollen and dark red in color, the redness extending over the pharynx and streaming up into the roof of the mouth. On one or both tonsils you will see a patch of ashen grey membrane which looks as though it had been planted onto the tissues, not

spots located in depressions of the tonsils but patches standing out from the surrounding tissues. By your next visit these patches will have extended in all directions. With these patches you have diphtheria, without them you do not have it. What shall be the treatment? Aconite for the fever; belladonna for headache; phytolacca for enlarged glands, etc., and echinacea for the diphtheritic poison. The echinacea must be given in comparatively large doses, ten to fifteen drops of the specific tincture every two hours combined with the phytolacca. As a local treatment I rely almost exclusively upon peroxide of hydrogen diluted with from one to three parts of pure water used with an atomizer every hour or two. Echinacea and phytolacca with the peroxide of hydrogen locally are the diphtheria remedies. As adjuncts I use whatever seems indicated. In place of the aconite or belladonna



sometimes gelsemium, rhus, or bryonia might be the indicated remedy. I use specific remedies and follow specific indications as far as possible.

I know there is nothing new in this treatment but it is clean, safe and with it curable cases will recover. My only fear is the paralytic complications which in this climate carry off our patients by attacking the heart. Extreme care is necessary in the after treatment. A safe precaution is not to permit your patient to sit up for at least a week after the active symptoms have subsided. Strychnia in some form (I prefer tinct. nux vom., if you have a reliable preparation,) should be given as soon as the fever has subsided. If the heart shows signs of weakness and it often does, digitalis should be given in small doses frequently repeated in addition to the nux. With this treatment and a simple yet NUTRITIOUS diet the majority of diphtheria cases will recover.

How about antitoxin? Would I use it? Yes, in a case showing malignan-

cy in the beginning with great depression I would use antitoxin and use it just as soon as I had diagnosed the disease. Such a case will very likely prove fatal with ordinary treatment and I can afford to run the risks of adding another poison to the one already in the system, and prejudice should not be permitted to interfere with the use of anything which offers any prospect of benefiting our patient.

I believe that antitoxin is a greatly overestimated remedy. All its good points have been fully exploited in the interest of the manufacturer of the remedy, and while statistics show a great decrease in the mortality of diphtheria proper under its administration, it may be doubtful whether the good results are due to the use of antitoxin or the non-use of other virulent poisons such as bichloride of mercury, etc. Certain it is that the paralytic complications which are most to be dreaded have not been lessened but rather increased by the use of the antitoxin treatment.

Raised the Dead With Cactus.

D. S. STRYKER, M. D., Portland, Oregon.

Editor California Medical Journal:—
At the National in Portland, June 17, the subject of bryonia for blindness was discussed, and one lady M. D. told of restoring the sight of one that had been blind two years with the bryonia treatment. At this, a portly, good humored M. D. from San Francisco

said, "We can cause the blind to see, can we raise the dead?" The question called to my mind an interesting case.

In the fall of '76, I was hurriedly called to see a Miss Florence R., age 20. Messenger reported "that her heart had busted." It being nine miles from my place, it took me some

time to get there and when I arrived her father met me at the gate and said "Doctor, you are too late, she has been dead a half hour, but get off and come in." I entered and naturally went and examined the patient. She was dead to all intents; no signs of breathing; no pulse at wrist or elbow; I put my ear to the heart and there was a slight sissing sound. I called for a teacup half full of water and a teaspoon. The father said, "Doctor, is there any hope?" I told him there was only a hope. I put fifteen drops of Lloyd's specific tincture cactus in two ounces of water and kept her tongue moistened with it. In about fifteen or twenty minutes the circulation began to return and she commenced breathing, and within a

half hour after that she turned over on her side. The father said, "My God, doctor, are you agoing to raise the dead?" I told him I certainly would if I could. She slept well the balance of the night (it being 11:30 P. M. when I got there). When she awoke in the morning she was greatly surprised to find the house full of people, and her father pointed to me and said, "If it had not been for that doctor, you never would speak again." She made a good recovery. I saw her several years after; she was married and had several children. I have often thought how many seemingly hopeless cases might be saved if the doctor could call to mind just the right remedy.

A Malformed Kidney.

CHAS. CLARK, M. D., San Francisco.

A thorough knowledge of anatomy is admittedly one of the essentials which go to make a practical physician and surgeon, but in studying this branch we are prone to forget that there are exceptions to the rule, viz., anomalies and malformations.

On the theory that what has occurred once is apt to occur again, a knowledge of the character of these malformations often stands one in good stead.

Believing it to be the duty of those who have been fortunate (?) enough to come across anomalies to report them, I will describe to the best of my abil-

ity a malformation of the kidney, found at a post mortem during the latter part of my service at the Cook County Hospital, Chicago.

The subject died of pneumonia and his history never showed any trouble with the urinary apparatus.

Nothing abnormal, except the characteristic lesions of pneumonia, was found, until search for the kidneys in their normal position failed to discover them, when the intestines were removed and the irregular mass of renal substance, about to be described, was found at the back part of the abdominal cavity, overhanging the pelvic brim.

The mass consisted of two portions. The left hand portion resembled the upper two-thirds of a normal kidney and occupied a position just to the left of the spine, extending downward from the upper margin of the body of the third to the middle of the body of last lumbar vertebra. This portion measured two and one-half inches in length, two inches in breadth and an inch in thickness. It was joined to the right hand portion by an isthmus of renal tissue one inch long, one inch wide and half an inch thick, extending between the lower part of its internal border and the right side of the circumference of the other portion.

The right hand portion was circular in outline, three and one-half inches in diameter and an inch in thickness at its thickest part around the hilum and half an inch thick at its circumference.

This portion lay on the great vessels in front of the last two lumbar and the first sacral vertebræ. Occupying the center of its anterior surface was an irregular circular depression one inch in diameter, the hilum, from which the right ureter emerged and passed directly downward.

On the inner border of the left hand mass was noted the hilum with the ureter passing downward in front of the above-mentioned neck or isthmus.

One peculiar feature noted was the arrangement of the circulation. The arteries were two in number—one large, the other small. The larger or left renal artery was given off from the left side of the aorta, opposite the middle of the body of the third lum-

bar vertebra and passed outward and entered the left hilum.

The smaller was given off from the front of the aorta, half an inch below the origin of the larger, and passing downward entered the right hilum at its upper margin.

The veins were also two in number and like the arteries, one large and the other small.

The larger was given off from the vena cava at the same level as the larger artery and passing downward bifurcated, both branches entering the right hilum at its upper margin.

The small or left renal vein arose from the left side of the vena cava at the same level as the larger vein, passed to the left over the aorta and entered the hilum in front of and just below the larger renal artery.

The entire mass weighed a fraction over ten ounces.

The supra renal capsules were not found.

A Mean Insinuation.

A woman doesn't mind it
If she isn't richly dressed;
And she's seldom ill at ease because
Her gowns are not the best.
With perfect firmness she can face
The crowd, however great,
If she's only half way certain that
She has her hat on straight.

—L. A. W. Bulletin.

The meanest man who ever lived
had some good streaks in him.

Every man who knows he is right
doesn't have to get mad.

Everybody can look well, but all
cannot see well.

Recollections of the National.

ELI GETTHERE, M. D., Sweetbriar, Wayback.

It is so long since I have been East that I was really laboring under the impression that Eastern people were considerably different than the usual run of human beings. Upon meeting them, however, I was readily convinced that they were just like other people, and a nicer lot of men it is hard to find than are our Eastern brethren and their friends.

The way the Pacific Coast delegates did things at the Portland was a caution. Their headquarters were the features of the National. The liberality with which they dispensed the refreshments, and the general hospitality they extended to the visitors, were truly commendable. It was whole-souled Western hospitality—none of your “Indian giver” affairs. The quarters were open for the comfort and enjoyment of the delegates and their friends, who were free to call upon the genial and polite attendants for all they desired. Much can be said for the ladies (God bless them), ever mindful of the helpless condition of man, they were present in round numbers to make everyone comfortable, in which they were signally successful upon this memorable occasion. I earnestly advise my bachelor friends to enter the state of matrimony and to take their partners along when undertaking a journey of any

distance, if they want to travel with solid comfort.

Our Professor Maclean, tall and commanding, with that inborn suavity of language so characteristic of him, with a word and smile for everybody, made friends as fast as he went. With Easterners as well as Westerners he was soon a favorite, and when he presided over his section there were but few who did not make up their minds then and there that he was the coming man. When the Californians started for Portland it was with the firm conviction that they had found the man for the Presidency. When the Easterners met and heard Maclean they were satisfied that the office had found the man, and when the electoral college met he was elected with a hurrah.

The “push” was there, of course, and enjoyed itself on what there was in sight. Though it must be said to their credit that they maintained a state of beastly sobriety.

“Papa” Baskowitz was the life of the party and with his jolly brother, Professor Baskowitz of New York, furnished a great deal of amusement for us all. Dame rumor has it, that when the brothers first met Tuesday morning, after a separation of thirty years—“Papa” was in bed—they kissed by executing a flank movement; then the professor lost his balance, and as they

lay for a few moments face to face they were eight inches taller than when standing on their feet. There was quite a contrast between them and our tall friend from Texas. Johnson says in Texas men never spread out but always grow in height, in a vain endeavor to reach the "Lone Star." It was also demonstrated that good nature is as abundantly present in a Texan as is altitude.

During the first few days of our stay in Portland, Prof. Church was terrible scarce. About the time everybody began to wonder whether or not he had "jumped" the town, he was ushered upon the scene with a charming bride. Then his quietude was apparent. Lucky fellow, that man Church. Wouldn't mind finding a pretty charmer myself.

Talk about a fellow with an appetite for breakfast! Well, now, if my friend Mattner can't hold his own, I'll eat my hat. He and I ran a race eating lobster, one morning—he gave me cards and spades and beat me ten points. He was champion after that without further opposition.

Was Hamilton in it? Well, now, I wonder. He must still be traveling on "velvet," for he never missed a "raise" nor failed to call a "bluff." But when he met his ebony Jemima from "Coontown" on the Vancouver railway he had four aces beaten with hands down. Gee wiz! wasn't she handsome; I see the love in those eyes yet, honey. She wasn't a bit backward in her love making, either. The way she wiggled those luscious lips was poetical. I can almost hear

her sing "Yo's ma honey boy" at this moment. The manner in which the old professor chuckled indicated without words that he enjoyed it.

Old reliable Gere enjoyed himself as only a "dead game" sport can. The frequency with which he could deal himself four "typewriters," or two pairs of tens, was simply phenomenal. The only incident which tended to mar his pleasure was the sign on the door opposite the room he occupied in the hotel, which read "Push the chamber maid." Then he wanted to know why the hotel people had put him in that particular part of the house.

Those fellows, Stetson and Mehrmann, beat the world on throat medicine. They had had enough for all comers and took excellent care that no ministerial sore throat went begging for the indicated lubricator. They had a sufficient quantity to extinguish a small conflagration.

Goodale!—well, now, you can just bet it was good—ale. I was never so surprised in an old deacon in my life. He is just the right kind of people to travel with; a little racket would not disturb his slumbers, and he'll not say nay, neither.

I used to know Hervey on the "bleechers" at college, and do you know that I always had an idea that he was rather "stiff." He's a genuine trump, however, and the trip to Lake Minnetonka next year would be incomplete without him. I think but little persuasion will be required.

No one man owns the road.

A Review of Serum Therapy.

M. H. LOGAN, Ph. G., M. D., San Francisco.

To a proper understanding of this subject some knowledge of bacteriology and chemistry is essential.

A summary of the opinions relating thereto, held by large number of physicians and chemists, appears about as follows:

(1) That non-virulent microbes exist in all parts of the habitable globe.

(2) That they were made disease-producing in the case of cholera, small pox, syphilis, diphtheria and tuberculosis in the thickly populated centers of the Old World through overcrowding and bad hygienic conditions, such as have never been made known to us.

(3) That the virus is always derived from a previous case, and is spread, either directly or indirectly, through human intercourse.

(4) That increased vital resistance renders persons immune save only in exceptional instances and in tuberculosis.

(5) That if virulent bacteria could be prevented from finding a lodgment in human tissue, they would, for want of nutritive pabulum, soon return to their primitive dormant state.

(6) That isolation, quarantine and disinfection, under direction of the physician, are the only means by which we may hope to successfully prevent the spread of contagious and infectious diseases.

The effort has been to make all diseases fit the microbe theory and succumb to serum therapy. How far this effort has succeeded will appear from the results of the labors of bacteriological specialists.

The foundation of bacteriology and hence of serum therapy dates properly with Pasteur. He had precursors, however, in the persons of Loewenbroeck, Cagniard, Latour, Raspail, Davaine and Jenner. Although he was neither physician nor surgeon, yet he did more to advance this science than the physicians of all schools combined, and, happily, whatever virtue there is in it, no school of medicine can claim priority in its application.

"The researches of bacteriologists have established the fact that the pathogenic action of those bacteria which have been shown to be concerned in the etiology of specific infective disease, is due to the formation of toxic products during the active development of the bacterial cells. The discovery of these toxins and toxalbumens has led to a line of research, the object of which is to isolate and study each of these toxic products by the methods of chemistry and experimental pathology."

IMMUNITY.—Kind nature has provided the human family with partial immunity. This is exhibited in dif-

ferent degrees in the various races and sections of the globe. The negro race is decidedly less subject to yellow fever than the white race, and this disease is more fatal among fair-skinned nations living in temperate climates than among the Latin races inhabiting subtropical regions. On the other hands, small pox is exceptionally fatal among the negroes.

This race immunity is probably an acquired tolerance, due to national selection and heredity dating back many centuries. It is very strikingly exhibited also in the lower animals. For example, the *carnivoræ* are immune from anthrax and septicæmia, while *herbivoræ* are extremely susceptible to their ravages. Typhoid fever, cholera and relapsing fever are diseases of man only. Tuberculosis is common to man, cattle, apes, and, by inoculation, some small herbivorous animals, while *carnivoræ* are, as a rule, immune. Glanders is essentially a disease of the horse; it may, however, be communicated to man, guinea pigs and field mice, while house mice, rabbits, cattle and swine are to a great extent immune. Anthrax may be communicated by inoculation to man, cattle, sheep, guinea pigs, rabbits and mice; but rats, dogs, carnivorous animals and birds are generally immune. The young are more susceptible than adults of either man or the lower animals.

There is also an individual susceptibility and immunity which may be either natural or acquired; and that unexplainable condition of personal idiosyncrasy will account for a certain

amount of it. Immunity may be established by a gradual exposure, and either natural or acquired immunity may be much reduced by debilitating habits, or by anything that reduces the vitality or powers. In the case of man clinical experience shows that those addicted to the excessive use of alcohol are especially liable to contract infectious diseases, such as pneumonia, erysipelas, yellow fever, etc.

In the scale of living beings man stands at the head, and the unicellular organisms, known as bacteria at the foot; yet the relation of these microbes to man are more important and more complex than those which exist between man and other simple groups of living organisms. In the absence of bacteria, or some other agent, to perform the same functions, the continued existence of man and the other higher animals upon earth would be impossible, for it is due to their activity that the highly organized tissue is reduced to its lowest terms after death of the individual, and made pabulum for new growth and new forms of life. But for this wise provision, nature would long since have been exhausted.

The moment life is extinct the process of destruction begins, and the more favorable the conditions the more rapid is the change.

The saprophytic bacteria naturally present in the alimentary canal of all animals, penetrates the tissues at the moment of death, and putrefactive decomposition is the result.

The living subject while in health resists the invasion of these natural parasites, and is able to dispose of a

certain amount when injected into the circulation. Some of these pathogenic bacteria are commonly found on the surface of the body or on the mucous membranes in healthy individuals. The saprophytes of the alimentary canal have been mentioned. The micro-

coccus of croupous pneumonia is frequently found in mouths of healthy persons. The staphylococcus aureus and albus are also frequently found on healthy individuals, and diphtheria bacilli in the mouths of those that never have the disease.

Prepare for the Next National.

H. B. MEHRMANN, M. D., Oakland, Cal.

It is but reasonable to suppose that we would be inclined to censure the Eclectics of California for not turning out in greater numbers at the late session of the National Association held in Portland, Oregon. Nearly sixty physicians had promised to attend, of whom about forty promised to take their wives; in all, we had ninety promised, and of course expected an even hundred with that showing.

At the outcome, however, we were represented by just twenty practitioners and some fifteen wives and friends, in all thirty-five people. What we lacked in numbers we made up in enthusiasm, and a pleasanter trip or more enjoyable time could hardly be imagined.

I do not intend to find fault with any one for not attending. I wish, nevertheless, to impress upon them that what they missed can never be replaced. Their is a void in their Eclectic careers which can never be filled.

Every man knows his business, and no doubt those who did not materialize

had good and sufficient reasons for remaining away. I would request of them as a sort of penalty for their nonattendance that they pass the following resolution, the preamble being understood: Resolved, that I will do all in my power, both by labor and actual attendance, to assist our National President, Dr. D. Maclean, to make the session of the National Eclectic Medical Association of 1897, to meet at Lake Minnetonka, a complete success." Upon the success of the National depends the success of Eclecticism all over the United States, and we of the glorious State of California must not lose sight of the fact that in contributing our share we not only benefit ourselves but also those beyond our jurisdiction. Attendance at the one session has caused all present to deeply regret not having taken an active interest in the National long years ago.

Now that the ice is broken I can safely say that the majority of those who took the Portland trip will be active and earnest workers for the National

for all time to come.

That is the way it should be. We owe it as a duty as much as we owe it to our country to exercise the power

of the ballot. Let us see how large a delegation we can send to Lake Minnetonka next June.

Sleeplessness.

It is unfortunate that the physiology of sleep is not better understood. It is even more unfortunate that what we do know about the phenomenon of sleep is not more diffused among the profession. How frequently, indeed, do we observe physicians who mistake unconsciousness for sleep, and who seemingly regard the goal of the application of their therapeutical measures, as having been reached, when they have succeeded in rendering a tired, worn out, nervous individual oblivious to his surroundings by placing him in a condition which they call sleep, but which is simply unconsciousness. An experience of several years in insane hospital practice presented to the writer, in a very strong light, the enormity of this error and its wide prevalence. It was no uncommon sight to see patients brought to the hospital in an unconscious state, due to the administration of narcotics, opium or morphine being the favorite drug used. One case is worthy of mention here, a male, neurasthenic, harmless, but suffering from the exaggerated mental symptoms, so marked in this disease, was accompanied by his physician to the hospital. The physician stated his reason for coming was, that he considered it important

to keep his patient asleep, so that he would not appreciate the humiliation of entering the hospital, and further, that inasmuch as he had not been sleeping well for some time, and that he was now sleeping, he considered the opportunity a good one to let him recuperate. To this end, the physician was at intervals giving hypodermic injections of morphine, and the poor, worn-out, narcotized patient, saturated with morphine, and believed to be asleep, was, as best he could, with his worn-out nervous mechanism, fighting for his life, which his respiration, weak pulse and inhibited reflexes, showed was at very low ebb. This case was not an exceptional one; it was, alas, too common an experience. The physician had lost sight of the very essential principle which should govern our therapy in the treatment of sleeplessness, and that is, that sleep has for its object the repair of the wear and tear of vital processes of life, and to insure sleep we must not interfere with these processes, which we do when drugs are given until sedation results.

There is another thing to bear in mind in the consideration of sleeplessness, and that is, that there is a source of irritation somewhere in the econ-

omy, which, if relieved, will be followed by sleep. Again, "an axiom" well worth remembering, is, that the more gentle the means employed to induce sleep the more natural will be the sleep induced, and the more gentle the means employed the more careful must we be to select the right time for their use. We believe that Dujardin-Beaumetz was right when speaking of the use of drugs in the treatment of sleeplessness. He said: "That for a drug to be hypnotic it must imitate the natural condition of sleep by effecting a lowered intra-cranial pressure and that drugs which, though bringing about unconsciousness do not lower cerebral pressure, or which increases it, cannot claim to be hypnotics. Opium and morphine are objectionable on this ground. Drug treatment must put the patient in a position to go to sleep in a natural way, and not put him to sleep." Sedatives do this, but narcotics no not.

In the use of sedatives we must be cautious and not use them *ad libitum*. The writer in a paper on "Sedatives in the Treatment of Insanity" (Hospital Bulletin of Minnesota, 1892), said, "Each case is a 'law unto itself,' and as such requires patient and persistent study ere we commit the folly of giving a hypnotic, when more simple and efficacious methods would produce satisfactory results." You cannot cure sleeplessness by drug treatment; the drugs simply conserve nervous energy and act as valuable assistants to the building-up process, necessary to cure sleeplessness. Sedatives act, as before stated, by placing the patient in a po-

sition to go to sleep, and nature does the rest.

In our experience we have learned to rely on the bromides, chloral, cannabis indica and hyoscyamus as sedatives, which, if judiciously used, bring order out of chaos. The bromides lower the sensibility of the brain and thus promote sleep. The single salts can be used, but in the writer's experience, where a sedative is indicated in sleeplessness, it is better to combine them, and where there is any excitement, add chloral. Cannabis indica is a sedative which is but little used by the general practitioner, and for the reason that it is misunderstood, misrepresented, and as a result never used as it should be. Clouston, Mathison and Echeverria have taught us their value. Hyoscyamus is another sedative, the value of which is not appreciated, a drug which is indorsed by Budde, Brush, Krafft-Ebing as a hypnotic. Now, these valuable sedatives, when combined, give us a thoroughly reliable and satisfactory agent, with which to treat sleeplessness, and in the writer's experience no more elegant or reliable preparation is before the profession than that of Bromidia, in which is combined in proper proportion, the bromide of potassium, chloral hydrate, hyoscyamus and cannabis indica. We feel that the profession can always rely upon this combination, and find it especially useful in the treatment of sleeplessness.—The Medical Fortnightly.

A vacant mind is a good place for the devil to store mischief in.

Sciatic Neuralgia—Reports of Cases.

E. H. GOYER, M. D., Covelo, Cal.

Case 1—On December 1, 1894, was called to see Mrs. R. B., aged forty-six years. Found her suffering with neuralgia of the right sciatic nerve, complicated with chronic cystitis. Pain excruciating and shooting to the end of her toes; the urine burning and scalding, giving her intense pain when passing.

Temporary relief was had from the neuralgic pains by her laying on the affected side. Prescribed for the sciatica

R

Sp. m. bryonia.....gtt xv
Sp. m. melilotus.....gtt x
Sp. m. jaborandi..... $\frac{3}{4}$ i
Aq. dest. q. s..... $\frac{3}{4}$ iv
M. Sig. $\frac{3}{4}$ i every hour.

For the cystitis prescribed

R

Sp. m. eryngium..... $\frac{3}{4}$ i
Aq. dest. q. s..... $\frac{3}{4}$ iv
M. Sig. $\frac{3}{4}$ i every three hours.

The improvement was rather slow, she fully recovering, however, in four months. It was three months before she could get out of bed from the first time I saw her. This was the worse case I ever treated.

Case 2—On March 4, 1895, was called to see Mr. E. G. for sciatic rheumatism of the right side. Just as long as he would lie on that side he would be perfectly comfortable, but

when he attempted to move over on the other side it seemed as if knives were thrust through the affected member. An Allopathic physician told him to prepare to die. Prescribed

R

Sp. bryonia.....gtt x
Sp. melilotus.....gtt v
Sp. jaborandi..... $\frac{3}{4}$ i
Aq. dest. q. s..... $\frac{3}{4}$ iv
M. Sig. $\frac{3}{4}$ i every hour.

March 19th, just fourteen days after being called, I discharged the case.

Case 3—On April 18, 1895, was called to see Mrs. B. H., who complained of pain in the left hip. On examination, found a very painful neuralgia of the sciatic nerve, complicated with ovaritis. It seemed impossible for her to move on account of the extreme pain produced. Prescribed

R

Sp. bryonia.....gtt xv
Sp. melilotus.....gtt x
Sp. jaborandi..... $\frac{3}{4}$ i
Aq. dest. q. s..... $\frac{3}{4}$ iv
M. Sig. One teaspoonful every hour.

For the ovaritis

R

Sp. saw palmetto..... $\frac{3}{4}$ iss
Aq. dest. q. s..... $\frac{3}{4}$ iv
M. Sig. $\frac{3}{4}$ i every four hours.

On May 28th, I discharged the lady cured. She was treated for three

months previous to her calling me by an Allopathic physician for phlegmasia dolens, without result.

Case 4—Miss M. P., confined to her bed, April 6, 1895. Had sciatica in left hip. R. Magnesia phos., 3x, in one grain tablets, every hour. Was convalescent in ten days.

Case 5—Mr. J. H., a blacksmith, came to me for treatment on December 6, 1895. Found him to be suffering from sciatic neuralgia in left hip, complicated with irritation of kidneys and bladder. For the latter I prescribed

R

Sp. eryngium..... 3 i
Sp. staphysagria..... 3 i
Aq. dest. q. s..... 3 iv
M. Sig. 3i every four hours.

For the sciatic pain I prescribed

R

Sp. bryonia..... gtt xv
Sp. melilotus..... gtt x
Sp. jaborandi..... 3 i
Ad. dest. q. s..... 3 iv
M. Sig. 3i every hour.

At this writing he is working at his trade, the cold, rainy weather having no effect on him whatever. This gentleman paid an Allopath \$117, without any benefit.

Responsibilities of Physicians.

A. E. COLERICK, M. D., Pacific Grove, Cal.

Among the many responsibilities incumbent upon those leading professional lives, perhaps there is none greater than on those who are engaged in the medical profession. For they not only have duties to perform pertaining to the healing of the body, but are sometimes called upon to administer the healing balm to the mind of the patient as well. If, therefore, on account of their critical condition patients are anxious in regard to the prospects of a future life, how important that the attendant physician should be a man of God and familiar with the oldest *Materia Medica* known—The Bible. For in that grand old book we not only find

prescriptions to assist nature in curing diseases to which the mortal body is subject, but also remedies, when scientifically and properly applied, which seldom, if ever, fail to heal the sin-sick soul.

Since life is so brief and uncertain, notwithstanding the advanced medical knowledge and skill of the present time, how necessary then that both medical adviser and patient have a good hope of eternal life through Christ, the great Physician and redeemer.

In diagnosing diseases, carefulness and skill is often requisite in order to arrive at a correct prognosis. Hence it is of vital importance that the at-

tending physician should never be otherwise than perfectly sober and in possession of all his faculties, for he knows not the day nor the hour when he will be summoned to the bedside of the sick and suffering.

I regret to say that some M. Ds. have been in the habit of prescribing tobacco for stomach troubles and other infirmities. However, I am glad to believe Eclectics are seldom guilty of that egregious error. They have no need to prescribe it internally, because we have better remedies. Other physicians, by the injudicious mode of prescribing opium in its different forms, either by hypodermic injections or otherwise, cause their patients to acquire the habitual use of the drug; and the habit once formed is generally followed through life, and the last stage of those patients is worse than the first.

A student who had just taken leave of his preceptor to start out in the practice of medicine on his own responsibility was called back, and the doctor said to him, "I want you to understand one thing: Physicians kill more than they cure." He would not have had occasion to make that humiliating confession had he lived in this progressive medical age, and fortunate enough to have the privilege of attending a course of lectures in some regular Eclectic medical college. Yet, we might ask ourselves this question, humanly speaking: "Is it any worse to kill our patients outright by using heroic treatment than it would by prescribing the medicated liquors, called medicine, as kept on stock by the

druggist of to-day, thereby causing them to form habits of inebriety that will eventually prove their ruin, by killing themselves with strong drink and finally fill a drunkard's grave, bringing suffering, misery and disgrace upon their posterity." While the responsibilities and duties of the medical fraternity are great, at times his temptations are great also; his professional duties are such that in discharging the same he may be tempted to deviate from the path of rectitude through the lusts of the flesh. For this reason every practitioner of the healing art should be conversant with, seek help from and follow the advice given by the great Physician, when he taught his students to pray: Abandon us not to temptation, but deliver us from the evil one.

Then when the Master calls for you
and for me,

If He only finds us waiting
In the morning's happy light,
In the strong and fiery noontide,
Or the coming of the night?

If He only finds us watching,
Listening for his sudden call,
Then His coming, when we think not,
Will be the grandest hour of all!

TAKE YOUR CHOICE.

The following lists of questions on "Materia Medica and Therapeutics" were used by the Oregon Board of Medical Examiners at the seventh examination, Portland, Oregon, July 7 and 8, 1896.

They were kindly forwarded to Our

Journal by J. A. Kuykendall, M. D.,
C. M. C. '96, who was one of the suc-
cessful candidates for a license.—ED.

REGULAR.

W. A. Cusick, M. D.

1. From what is elaterium derived?
In what diseases is it applicable?

2. Common name and habitat of
aconite.

3. In what forms of disease can
strychnia be beneficial?

4. What is oleum pulegii?

5. What dangers may be appre-
hended from excessive or long-con-
tinued use of ergot?

6. Name the principal antipyretics.
How do they reduce temperature?

7. Name a list of alteratives, and
describe their action on the human
system.

8. What effect have sedative doses
of quinine on cerebral circulation?

9. What effect has physostigma on
the spinal cord, and what drug has
the opposite effect?

10. Name a list of the best cerebral
sedatives.

ECLECTIC.

G. W. McConnell, M. D.

1. Differentiate Eclecticism, Homeo-
pathy, Allopathy and Hydropathy.

2. Name the most important ele-
ment in the cure of disease.

3. Give preparation and properties
of specific phytolacca decandra.

4. Give cause, symptoms, diagnosis
and prognosis of membranous croup.

5. Name ten indications of good
health.

6. What do you understand by ex-
cess, defect and perversion of reason?
Give treatment.

7. Define active and passive general
hyperemia, and give treatment for
both.

8. Name the causes of dark brown
or black, green or dark green, and
clay-colored discharges of variola, ru-
beola, scarlatina, varicella, parotitis
and pertussis.

HOMEOPATHIC.

Byron E. Miller, M. D.

1. Name three remedies most useful
in the treatment of diphtheria, and
give characteristic indications for each.

2. Give the indications for bry. and
phos. in pneumonia.

3. Describe the characteristic stool
of phos., merc., pod. and verat alb.

4. What action has cactus g. and
digitalis upon the heart?

5. Name three remedies most useful
in treatment of cholera infantum, giv-
ing indications for each.

6. Describe the throat symptoms of
bell. and apis.

7. Give characteristic skin symptoms
of apis., rhus tox., sulphur and graph-
ites.

8. In hemorrhage of the bowels in
typhoid fever, name three most useful
remedies.

9. Give the action of caulophyllum,
macrotin and sabina upon the uterus.

10. Give head symptoms of bella-
donna, bryonia and sepia.

N. W. Mallory, Crocker building,
San Francisco, keeps tables, chairs,
batteriss, instruments and all sorts of
things that doctors use.

Alumni and Personal.

DR. DORA M. HAMILTON, Editor

Communications for this department should be addressed to its Editor, 1422 Folsom Street, S.F.

Dear Alumni: We do not suppose it is of any use to write this month, for all the readers of Our Journal are wealthy M. Ds., who can and do take a summer vacation, and are therefore away and this will be an old journal before you see it. We will, however, take up the class of '82, but as we know very little about them it will not be very interesting. It is noticed that the later classes take more interest in the news of classmates and fellow students. This is probably owing to a better class organization. When classes elect officers, wear college pins and do as other college graduates do, it creates enthusiasm and binds them closer together; makes all think more of college life, our professors and each other. In union there is strength.

Class of 1882:

Peter Harmony, M. D., Wadsworth, Nev. Whether practicing or not is not known.

W. S. Henrahan, M. D., Porterville, Cal. Practicing.

Orient C. Higgins, M. D., Porterville, Cal. Practicing.

Mary H. Kenney, M. D., Oakland. Retired from practice.

J. A. Little, M. D., and R. W. Tift, M. D., both dead.

Harriet J. Welch, M. D. The doctor was the first to use electrolysis in

this city. Am unable to say if she is still in practice.

James Surman, M. D., of this class, many of our readers know as one of the leading physicians of Portland, Oregon. The doctor has a fine home in the city of Portland, and visits the old college occasionally when on his annual visit. He was one of the Oregon delegation who visited the State society last November. No member of the society will ever forget those pleasant visitors.

Died, at her home, 1534 Mission street, San Francisco, July 15, 1896, Mrs. Margaret Herrick, wife of Dr. L. F. Herrick. The death of Mrs. Herrick was a sad blow, though not entirely unexpected by her family and friends. Mrs. Herrick was a woman of exceptional character, one whom family and friends will always hold in loving remembrance. In this great sorrow, Dr. Herrick has the heartfelt sympathy of his many friends, and especially Our Journal.

Our Journal congratulates Professor and Mrs. Cornwall on the advent of a baby girl at their home in Marin county. Professor Cornwall considers it a most wonderful baby.

Married, at the home of the bride's parents, Mr. and Mrs. H. McIntosh, Wednesday evening, July 22d, Miss Lida McIntosh and W. C. Field, M. D., both of Mogollon, New Mexico. The best wishes of Our Journal go with Dr. and Mrs. Field on this great journey.

Our Journal had the pleasure of a call from Dr. Munk of Los Angeles. The readers of Our Journal have all read the very interesting papers written by Dr. Munk. The doctor looked over our college and clinic rooms and expressed himself well pleased that there had been so great an improvement in the facilities for clinical work.

Class of '96 are located as follows:

Dr. A. M. Field, Guerrero street, between Seventeenth and Eighteenth.

Dr. Crackbon, McAllister street.

Dr. Holsman, Hayes street.

Dr. Buchanan, Laguna street.

Dr. Linqvist, Market street.

Drs. Enos and Ormsby have changed from Haywards and have offices in San Leandro and 1116 Washington street, Oakland.

Dr. Bryon has changed his location from Santa Paula to San Leandro. The doctor reports business good in his new field.

The daughters of Professor Maclean are spending the summer on Puget Sound. Miss Cecil is a member of the '97 class.

Married, in Manistee, Mich., Wednesday evening, June 10, 1896, Dr. Sherman T. White and Miss Weltha Rosalie Thomas. Dr. and Mrs. White will be at home, Redding, Cal., after June 28th.

Clearmont, Mo., July 1, 1896 — Dear Editor: I wish to dispose of my property consisting, of office, horses and buggy. The number of inhabi-

tants in the town is about 700. My practice will run about \$2,500 a year. The reason for selling is that my health is poor and I must move to the mountains. I will give some man a nice business on very reasonable terms. Yours truly, J. E. Shearer.

We hear from Dr. W. D. Coates, '96, who has located at Junction City, Cal., that business is brisk and collections are good. We will guarantee that the doctor will do the rest.

Dr. W. T. Hicks, '95, has moved his sanitarium from Los Gatos to San Jose, where he is now ready to receive patients.

Professor Logan is in receipt of a letter from Professor J. U. Lloyd, the author of "Etidorhpa, or the End of Earth." Professor Lloyd made many coast friends at the Portland National, to whom he wishes to be kindly remembered. By the way, have you read "Etidorhpa?" It can be ordered from Our Journal. Price \$2.

Indications.

Malto-Fer is indicated in phthisis, tuberculosis, debility due to organic diseases, nervous exhaustion, convalescence, anæmia, chlorosis, impoverished condition of the blood and cases generally where a chalybeate tonic and mild stimulant is required. A full dose half an hour before retiring has been successfully prescribed in several cases of persistent insomnia. It is extensively used as a tonic stimulant for nursing mothers, showing decided galactagogue properties.

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To insure accuracy, employ the typewriter when possible. Otherwise prepare manuscript with care, re-writing when necessary; be kindly thoughtful of the Editor and compositor, and do your own drudgery—time is money.

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California.

Editorial.

The Next State Meeting of Our State Society.

Our next meeting will be held on the 18th and 19th of November, and a full attendance is desirable. We call attention to the assignment of work and arrangement of subjects in another column, and hope that each Chairman and Vice Chairman will exercise due diligence in obtaining papers for their respective sections. Let there be a rivalry as to which section shall be best represented, and each act as if the success of the meeting depended on him and him alone.

Every Eclectic reader of Our Jour-

nal in the State, who is not already a member of the State Society, should consider it his duty to enroll his name as a member of the association at the coming meeting and contribute to the success of Eclecticism. There should be no drones in our hive. All should be workers for the common good. The time is coming, if it has not already come, when the physician who stands aloof from his State Society will be considered a back number. The Secretary will mail you a blank, and we hope you will promptly fill it, returning the same to him with the necessary accompaniment.

We earnestly appeal to those who are members of the society to contribute papers and be present at the annual meeting. Time spent in the preparation of a paper is not time lost. You will come in contact with the brightest minds of the State and cannot fail to acquire much valuable information which will be of benefit to you in your profession. We look for a large attendance and feel that our friends will not disappoint us.

Maclea.

Gresham's Law.

"Always and everywhere since the dawn of civilization commercial ratios have governed the coinage ratios in the purchasing power of coins. The dearer coin commercially always goes to the melting pot, is hoarded or exported, while the cheaper coin commercially is forced into circulation. Why? Because there is a margin of profit in such disposition—brokerage." This is the Gresham law.

In plain language this means that if a fifty-cent dollar be a legal tender, no one is so silly as to pay debts with gold. Is it reasonable to suppose that such a complication, if it come upon us, will restore business confidence and prosperity?

Definition of Disease.

Editor of Our Journal—In the July issue you ask for a scientific definition of "disease," and as nothing gives me greater pleasure than imparting to editors much needed information, I comply with your request.

A positive definition of *life*, upon which depends an accurate definition of disease, is impossible. We know that life is, and there we stop. To define it as a "manifestation of force" does not enlighten us, as *force* is a "form of energy" and *energy* is a "form of force," and we are "tramping in a circle."

But as all organisms, whether animal or vegetable, have a typical form, that of the cell, which is the ultimate morphological element in which there is any manifestation of life, therefore disease is a condition arising from a disturbance, an obstruction, depression or perversion in normal metamorphosis of the ultimate organic cells, producing a variation in structure or in function.

I read the above definition to my wife, and as it left her "kinder dazed" I think it must be "scientific" and makes the question of "disease" as clear as the "financial question," which I will not attempt to elucidate.

In the future, when the sweltering "dog days" have passed into the "diminution bow-wows" and the state of "masterly inactivity" which has enveloped me, induced by a thermometer registering 102° in the shade, has withdrawn itself, I will endeavor to furnish you with an article of interest, if in my power so to do.

Yours as ever,

H. Michener,

Wichita, Kan.

Dr. Michener's definition is up with with the times, and in spite of the effect it produced on his good lady we think it very clearly stated. We shall be pleased to put others on record. Next.

Our Frontispiece.

In the half-tone engraving of the group of delegates to the Portland National that serves for our frontispiece, most of our readers will recognize the likeness of one or more friends.

We hope to have a similar group of the delegates to the National and it will be interesting to compare the two and note the changes. We shall try to give from time to time portraits of prominent Eclectics, and subscribers should preserve their journals for binding. In a few years they will be valuable. If subscribers who are in arrears would promptly settle their bills many things of which we now only dream would take on form and substance. It is only a short-sighted indifference that keeps Our Journal from taking front rank.

Officers of the National.

President, D. Maclean, M. D., San Francisco.

First Vice President, G. W. Johnson, M. D., San Antonio, Texas.

Second Vice President, T. W. Miles, M. D., Denver, Col.

Third Vice President, Harriet C. Hinds, M. D., Orange, N. J.

Recording Secretary, W. E. Kinnett, M. D., Yorkville, Ill.

Corresponding Secretary, Pitts Edwin Howes, M. D., Boston, Mass.

Treasurer, W. T. Gemmill, M. D. Forest, Ohio.

The next meeting will convene on the third Tuesday in June, 1897, at Lake Minnetonka, a charming summer resort five miles from Minneapolis, in the State of Minnesota.

Officers of the Eclectic Medical Society of the State of California:

President, D. Maclean, M. D., San Francisco.

Vice Presidents, L. F. Herrick, M. D., and E. H. Mattner, M. D., San Francisco.

Recording Secretary, B. Stetson, M. D., Oakland.

Corresponding Secretary, H. B. Mehrmann, M. D., Oakland.

Treasurer, H. W. Hunsaker, M. D., San Francisco.

Place of next meeting, San Francisco, November 18 and 19, 1896.

Natural Food.

And Moses was 120 years old when he died; his eye was not dim nor his natural force abated.—Deut. xxxiv, 7.

The newest move in hygiene is the

so-called natural food system of diet, or a diet free from starch and canesugar. Its votaries urge that fruits in their season be substituted for bread and all other grain foods, potatoes and other starch vegetables. They claim that this course will be found by a brief experiment highly beneficial both to the meat eater and vegetarian.

When nature is untrammelled, her handiwork is always marked by beauty and efficacy. Hence it is at least possible that sickness as well as the painful deformity and unsightly decrepitude of old age is the result of artificial rather than natural causes.

If it be true that starch foods are unnatural to man, there is surely enough of them consumed to account for much of the poor health and premature old age that confronts us on every hand.

There needs to be more experimenting in this direction. Who of our readers having the means to afford it will live for a month upon porterhouse and other choice meats, with a variety of fine ripe fruits, but exclude all starch food and sugar, and report results to Our Journal? Here is a wide field for some one to explore.

Twenty-fourth Annual Meeting of the Eclectic Medical Society of the State of California.

The twenty-fourth annual meeting of the State Society will be held at California Medical College Hall on the 18th and 19th of November next, and we look for the best attendance and most interesting meeting of the society since its organization.

The following officers have been appointed by the President to take charge of their respective sections to outline the work and solicit papers from the membership to present in their several sections.

Should any member fail to be personally solicited, it will not absolve him from his duty to his society or school. Every Eclectic should do his utmost to make the meeting interesting, and present some topic of interest to the profession. The President expects every man to do his duty.

The Chairman and Vice Chairman of each section will report to the President the names of the contributors and titles of papers not later than the 15th of September, so that the program may be issued at as early a date as possible.

SECTION I.

Practice of Medicine—Chairman, R. Musgrave, M. D., Hanford; Vice Chairman, H. T. Webster, M. D., Oakland.

SECTION II.

Materia Medica—Chairman, J. L. Ccombbs, M. D., Grass Valley; Vice Chairman, John Fearn, M. D., Oakland.

SECTION III.

Surgery—Chairman, B. H. Forman, M. D., Ione; Vice Chairman, G. G. Gere, M. D., San Francisco.

SECTION IV.

Obstetrics—Chairman, A. W. Bixby, M. D., Watsonville; Vice Chairman, E. H. Mattner, M. D., San Francisco.

SECTION V.

Gynæcology—Chairman, C. E. Hailstone, M. D., San Jose; Vice Chairman, J. W. Hamilton, M. D., San Francisco.

SECTION VI.

Pædiatrics—Chairman, C. H. Wheeler, M. D., Sisson; Vice Chairman, A. E. Scott, M. D., San Francisco.

SECTION VII.

Nervous Diseases—Chairman, F. P. Mitchell, M. D., Shasta; Vice Chairman, C. N. Miller, M. D., San Francisco.

SECTION VIII.

Ophthalmology, Otology and Laryngology—Chairman, T. F. Kelleghan, M. D., Santa Barbara; Vice Chairman, F. Cornwall, M. D., San Francisco.

SECTION IX.

Electro-Therapeutics—Chairman, F. Fay, M. D., Sacramento; Vice Chairman, O. L. Jones, M. D., Oakland.

SECTION X.

Special Topics—G. W. Burleigh, M. D., Los Angeles; Vice Chairman, W. B. Church, M. D., Oakland.

D. Maclean, M. D., President.

The C. M. C.

Work at the college will begin on the first Monday in October. Notwithstanding the hard times prospects are flattering for a large attendance. Those interested should apply to the Dean for the announcement, which is now ready for mailing.

Anæmia in Young Girls.

In cases of pernicious, progressive anæmia in young girls, no matter from what cause, Dr. Mary Ward Mead, Camden, Ill., writing, says: "The arrest of development of the generative organs retard cure. I am early on the track for a speedy development in

those slow puberty cases, and when I see the dormant spot puff for a mammary gland I know that restoration will surely follow, and to arouse this slumbering, sympathetic and vaso motor system Sanmetto is truly great."

Publisher's Notes.

Has No Equal.

J. J. Grant, M. D., Monticello, Fla., says: "I find nothing in the materia medica to equal Aletris Cordial in uterine diseases. I have used it in a very obstinate case, which outstood several important remedies. When I put the patient on Aletris Cordial every diseased symptom disappeared in a week's trial. I have used it in several cases and can, therefore, say that it is an active and powerful agent for diseases of the womb."

The New York Post-Graduate.

The fifteenth annual announcement of the New York Post-graduate Medical School and Hospital has just been issued. Five hundred and forty-two physicians from all over this country have attended the courses at the institution during the past years. More than one thousand operations were performed in the hospital, which is one of the largest in the city, containing special wards for babies and children, while nearly twenty thousand patients were treated in the outdoor department. Recent discoveries have revolutionized medical and surgical methods, and a man whose medical educa-

tion ended fifteen years ago is not a physician or surgeon within the present meaning of the term. Post-graduate medical instruction is for the purpose of furnishing to these graduates in medicine a means of refreshing their knowledge. It supplies them with the opportunity of coming in direct contact with disease by means of special courses in the departments of medicine.

Tablets Pulsatilla Compound.

(Waterhouse)

This combination is an admirable uterine tonic and alterative. It is one of our specialties and will give the best of satisfaction to both physician and patient. R Specific pulsatilla, gtt. j; aletris, gr. j; mitchella, gr. j; caulophyl, gr. j; viburnum, op., gr. j, and cinnamon. This compound is valuable in metritis, endo-metritis, menorrhagia, leucorrhœa, dysmenorrhœa, ovarian pains, suppressed menstruation from colds, relieves after pains; in short, it is curative in hundreds of of these obstinate and disagreeable cases.

Viburnum and aletris are especially valuable in treating uterine diseases, to which we have added others equally as potent. Each agent may be found mentioned in late medical books, and are not fakes known only to the imagination of the manufacturer.

The tablets are put up in 2 oz. bottles, containing nearly 100 doses. May be used with our uterine wafers with advantage. Price per bottle 75c.

Book Notes.

PRACTICAL URINALYSIS AND URINARY DIAGNOSIS—A manual for the use of Physicians, Surgeons and Students. By Charles W. Purdy, M. D., Queen's University; Fellow of the Royal College of Physicians and Surgeons, Kingston; Professor of Urology and Urinary Diagnosis at the Chicago Post-graduate Medical School. Author of "Bright's Disease and Allied Affections of the Kidneys"; also of "Diabetes: Its Causes, Symptoms and Treatment." Second edition, revised. With numerous illustrations, including photo-engravings and colored plates. In one crown octavo volume, 360 pages, in extra cloth, \$2 50 net. The F. A. Davis Co., publishers, 1914 and 1916 Cherry street, Philadelphia.

In carrying out the design of this work the author first deals with normal urine, giving careful consideration to each constituent, so far as at present known. Abnormal urine, its source, chemical nature and composition, clinical significance with the most approved methods of its detection and determination is then fully described.

Urinary diagnosis follows with concise description of the special features of urine that indicate special pathological processes, together with enumeration of the leading symptoms of each disease, with an epitome of its nature and etiology. Finally, an appendix has been added upon the subject of urinary examination for life insurance.

The doctor who wishes to become proficient in this important branch of his profession will find this work of

the greatest assistance.

DIAGNOSIS AND TREATMENT OF DISEASES OF THE RECTUM, ANUS AND CONTIGUOUS TEXTURES. Designed for practitioners and students. By S. G. Gant, M. D., Professor of Diseases of the Rectum and Anus, University and Woman's Medical Colleges; Lecturer on Intestinal Diseases in the Scarritt Training School for Nurses; Rectal and Anal Surgeon to All-Saints, German, Scarritt's Hospital for Women, Kansas City, Fort Scott and Memphis Railroad, to East Side Free Dispensary, and to Children's and Orphans' Home, Kansas City, Mo.; Member of the American Medical Association, National Association of Railway Surgeons, the Mississippi Valley Medical, the Missouri Valley Medical and the Missouri and Kansas State Medical Associations, etc. With two chapters on Cancer and Colotomy by Herbert W. Allingham, F. R. C. S., England; Surgeon to the Great Northern Hospital; Assistant Surgeon to St. Mark's Hospital for Diseases of the Rectum; Surgical Tutor to St. Hospital, etc., London. One volume, royal octavo, 400 pages. Illustrated with 16 full page chromo lithographic plates and 115 wood engravings in the text. Extra cloth, \$3 50 net; half Russia, gilt top, \$4 50 net. The F. A. Davis Co., publishers, 1914 and 1916 Cherry street, Philadelphia; 117 West Forty-second street, New York; 9 Lakeside Building, Chicago.

In this beautiful work no superfluous language is used.

Every subject is classified so that one can obtain what they want without reading half the book.

The illustrations are all new and original, most of them being from

photographs of the cases of the author and Dr. Allingham.

It contains everything up to date of interest to those who wish to do rectal work.

It contains two important chapters that are entirely new in a work of this kind, namely: Railroading as an Etiological Factor in Rectal Diseases and Auto-Intoxication, or Auto-Infection, from the Intestinal Canal.

In short, it is the par excellence work on Diseases of the Rectum, Anus and Contiguous Textures for the general practitioner and student as well as the specialist, the contents of the work being comprehensive, complete and practical in the best sense.

In point of excellence of press work, paper, binding and particularly the handsome chromo-lithographic plates, it is unsurpassed among modern medical works, and its very moderate price renders it easily obtainable by every physician and student.

THE MULTUM IN PARVO REFERENCE BOOK AND DOSE BOOK. By C. Henri Leonard, M. A., M. D., Professor of Medical and Surgical Diseases of Women, Detroit College of Medicine. Flexible leather, 143 pages. Price 75 cents. The Illustrated Medical Journal Co., publishers.

This is a recent edition of the Dose Book, of which the title page informs us some forty thousand copies have been issued. The present edition is printed on very thin paper, and is bound in red leather, round corners, so as to make it specially light and handy for the pocket; the weight is

not two and one-half ounces. Beside the doses of some 3,500 preparations being given, it has numerous tables, such as the solubility of chemicals, pronunciation of medical proper names, poisons and their antidotes, incompatibles, tests for urinary deposits, abbreviations, table of fees etc. It will be found a handy pocket companion.

COLOR-VISION AND COLOR-BLINDNESS. A practical manual for railroad surgeons. By J. Ellis Jennings, M.D., (University of Pennsylvania), Formerly Clinical Assistant Royal London Ophthalmic Hospital, Moorfields; Lecturer on Ophthalmoscopy and Chief of the Eye Clinic in the Beaumont Hospital Medical College; Ophthalmic and Aural Surgeon to the St. Louis Mullanphy and Meth-Deaconess Hospitals; Consulting Oculist to the Missouri, Kansas and Texas Railway system; Fellow of the British Larynological and Rhinological Association; Secretary of the St. Louis Medical Society. Illustrated with one colored full page plate and twenty-one photo-engravings. Crown octavo, 110 pages. Cloth \$1 net. The F. A. Davis Co., publishers, 1914 and 1916 Cherry street, Philadelphia.

While this valuable little work is designed especially for the aid of railroad surgeons, still the subject is of general interest and one no well informed physician can be content without having at least a smattering knowledge of the subject of which it treats. Its low price brings it within reach of all.

ASEPSIN SOAP



MEDICINAL USES OF ASEPSIN SOAP.

FOR THE SKIN.—The antiseptic qualities of Asepsin and Borate of Sodium make this soap desirable for the preservation of the dermal tissues, and to remove and prevent cutaneous blemishes. It is valuable for roughness of the skin, acne, comedones, milium, blotches, excessive greasiness of skin, for softening and preventing roughness and chapping of the hands. It corrects abnormalities of the sebaceous glands, thereby regulating the lubrication of the skin, and is further useful to repair dermal tissues when they have been subjected to the deleterious action of chalks and cosmetic lotions.

CUTANEOUS DISEASES.—For the following skin affections it may be used freely with marked benefit: Acne vulgaris et rosacea, seborrhoea, eczematous eruption, herpes, psoriasis, prurigo, syphilitic eruptions, dermatitis, ulcerations, pruritic conditions, parasitic diseases, as scabies, for the relief of rhus poisoning, and for the removal of pediculi. A clean skin is necessary in any course of medication, and Asepsin Soap is a rational cleanser.

IN SURGERY.—The surgeon will find it valuable for cleansing the patient as well as the operator's hands, sponges and instruments. For its cleansing and antiseptic effects it may be employed in wounds of all kinds, chilblains, bed sores, ulceration, pustules, and for removing offensive and irritating discharges, and as a foot wash.

IN GYNÆCOLOGY.—It is useful in irritating and offensive discharges concomitant to diseases of females, giving rise to pruritic and inflammatory conditions. Leucorrhoea, simple vaginitis and vulvitis, ulcerations and pruritus vulvae, are conditions in which it is particularly indicated.

CONTAGIOUS DISEASES.—In the exanthemata it should be employed to hasten desquamation thereby shortening the period of contagiousness and hastening convalescence.

At the time I received the Asepsin Soap, I was suffering intensely from pruritus ani, and had already tried with scarcely even temporary relief, all—or nearly all—the standard remedies for this well-known ailment. I was well-nigh crazed with the intolerable itching, pricking, sticking, gnawing biting, burning pain. I had been nearly sleepless for several nights, and I was so busily engaged with my professional work all day long that it seemed to me that life was a burden, and I could get no rest at night. I frequently sprang from my bed, and ran wildly, crazily anywhere;—suicide would not be strange in anyone in such a condition.

Your Asepsin Soap I used without faith, but with astonishing and almost immediate relief and ease. I think I have never before recommended any special preparation, but nothing less than gratitude is due you for this benefit, and that gratitude I express most heartily now. I have delayed this letter many weeks, but I am still as thankful as ever, for my suffering was of a kind not to be forgotten,
PAUL T. BUTLER, M. D., Alamo, Michigan

ASEPSIN SOAP IS NOW READY FOR THE MARKET.

PRICE, \$1.40 PER DOZEN.

For toilet purposes, a cake of ordinary soap of this size is sold for 25 cents. In order to introduce it, on receipt of 40 cents in postage stamps, we will, for a time send one-fourth dozen cakes by mail to any physician who has not previously purchased it. Send for a quarter dozen, and you will never employ or recommend any other soap, either for toilet or medicinal purposes. Ask your druggist to keep it in stock. Address

**LLOYD BROTHERS,
CINCINNATI, OHIO.**

digestive inertia

Functional Atony, or whatever one may call it, is often at the bottom of a case of Infantile Diarrhoea during the summer months. If the digestive juices do not properly convert the food it ferments in the intestinal tube.

Lactopeptine

by artificially supplying the necessary digestive ferments, prepares the ingested nourishment for absorption, thus aiding in the restoration of normal function.

This is NOT THEORY, but
DEMONSTRATED FACT.

Be sure, however, that it's Lactopeptine and not some inert substitute.

SEND FOR SAMPLES AND
LITERATURE.

